	FORM	
. DISCLOSURE SUMMARY PAGE	DR-2 (Rev. 02/96)	DISCLOSURE
7007 0711 0000 0000		REPORT
COMMITTEE NAME (Must be same as on Statement of Ossasia di	For Office Use O Comm. #	ッ ス フ(o
- condon for Representative	Indexed S	Q
IMPORTANT: Indicate type of committee you are reporting for:	Audited	
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee	Computer	
(8) Support State of Candidates (7) County/City Central Committee	5 pa	193
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE	10/	22/2008
TELEPHONE	DATE S	GSEED
Penalties Due For Late Filed Reports Range from \$10 to	\$400	8
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:	* * * * * * * * * * * * * * * * * * * *	3 %
I AM FILING A 10/28/2008		PM S
(report date) REPORT FOR AN/A (1) ELECTION	/(2)NON-ELECT	ONYEAR.
Indicate or	ne 🗍	- In
CHECK IF AMENDMENT TO REPORT DATEDLocal Co	mmittees, enter Da	te of Election
Check if this is final (torming)		
County & Cou	Local Committees	, enter County in
Treating of Dissolution is filled.)		
STATEMENT OF CASH ON HAND		
of all monies held by the committee. This amount MUST be the		
or must be zero if this is first report filed.)\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD	5,511.8	52
Schedule A: Cash Contributions total (At 1)		
Schedule A: Cash Contributions total (Attach Schedule A)	4,850.0	0
Schedule C: Fund-raising Events total (Attach Schedule C)		
And total (Attach Schedule F)		
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	10,361.8	2
Schedule B: Expenditures total (Attach Schedule B)	0.000.0	
Schedule F: Loan Repayments total (Attach Schedule F)	9,000.0	<u>J</u>
be zero) (Attach DR-3)\$	1,361.8	<u>∠</u>
UNPAID BILLS (From Schedule D - Attach Schedule D)		
Attach Schedule F)	82.17	7
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)		
SANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES	X NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$		

CONTRIBUTIONS - MONEY TAKEN

(including candidate's personal funds)

SCHEDULE
A MONETARY
STATE RECEIPTS
CANDIDATE

CHECK IF
AMENDING
FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Cohoon for Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOW ETHICS AND CAMPAIGN DISCLOSURE BOARD.

caution: Section 68b.32a(6), Iowa Code, prohibits the use of information from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT
RECEIVED	& PAC CHECK		TO CANDIATE	RECEIVED
	number			
	ID#	Gary Hoyer		\$
10/15/2008	CK# 16487	619 Tenth St.]	500.00
		Fort Madision, la. 52627]	
	ID#	Randy Winegard		
10/15/2008	CK# 5880	3000 Kirkwood St.		500.00
		Burlington, lowa 52601		
	ID# 6449	Great Plains Laborers Dist. Council PAC		
10/15/2008	CK# 1470	5806 Meredith Dr. Suite B	1	500.00
		Des Moines, Iowa 50322		
	ID# 6098	Iowa Bev PAC		
10/15/2008	CK# 3598	321 E. Walnut - Suite 310]	1000.00
		Des Moines, Iowa 50309		
	ID# 8084	BNSF RailPAC		
10/15/2008	CK# 10598	P.O. Box 961039		500.00
		Fort Worth, TX 76161		
	ID# 6064	lowa F.O.R.E.		,
10/16/2008	CK# 2260	8525 Douglas Ave. Suite 48		200.00
		Des Moines, Iowa 50322		
	ID# 6042	Grocers PAC		
10/17/2008	CK# 1415	2540 106th St. Ste. 102	}	100.00
		Des Moines, Iowa 50322		
	ID# 9748	Midwest PAC		
10/23/2008	CK# 1045	1636 NW 114th St.		150.00
		Clive, Iowa 50325		
			SUB-TOTAL \$	3450.00

TOTAL (if last page of this schedule) \$	
· · · · · · · · · · · · · · · · · · ·	

Page 1 of 2 (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marrage) (See Page 2 of forms packet). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS - MONEY TAKEN

(including candidate's personal funds)

SCHEDULE
A MONETARY
STATE RECEIPTS
CANDIDATE

CHECK IF
AMENDING
FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Cohoon for Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOW ETHICS AND CAMPAIGN DISCLOSURE BOARD.

caution: Section 68b.32a(6), Iowa Code, prohibits the use of information from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT
RECEIVED	& PAC CHECK		TO CANDIATE	RECEIVED
	number			ļ
	ID#	Mark & Brooke Toale		\$
10/23/2008	CK# 3960	1597 240th Street		150.00
		Independence, Iowa 50644		
	ID#	Sean & Sara Dolan		
10/23/2008	CK# 2112	3367 - 270th Street		100.00
		Masonville, Iowa 50654		
	ID#	Bradford & Jeanne Deery		
10/23/2008	CK# 6231	101 Grand		500.00
		Burlington, lowa 52601		
	ID#	Doyle Hoyer		
10/23/2008	CK# 3348	3347 Country Club Ln.		500.00
		Fort Madison, Iowa		
	ID#	Mark & Denise McCulley		
10/27/2008	CK# 1210	425 Aspen Ridge		150.00
		Ames, lowa 50010		
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL \$	1400.00

TOTAL (if last page of this schedule) \$

4850.00

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marrage) (See Page 2 of forms packet). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2 (for Schedule A)

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT STATE PAC COMMITTEE: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE	SCHEDULE B Candidate	MONETARY EXPENDITURES
PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.		
COMMITTEE NAME (Must be same as on Statement of Organization)	check if amending form	
Cohoon for Representative		

DATE	CANDIDATE	NAME AND ADDRESS TO WHOM EXPENDITURE	PURPOSE		AMOUNT
EXPENDED	ID NUMBER	(Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	1	EXPENDED
(MM/DD/YR)	AND PAC				
	CHECK #				
	ID# 376	Iowa Democratic Party			
10/16/2008	CK# 5010	5661 Fleur Drive	State Party	\$	5,000.00
· · · · · · · · · · · · · · · · · · ·		Des Moines, Iowa 50321			
	ID# 376	Iowa Democratic Party			
10/21/2008	CK# 5011	5661 Fleur Drive	State Party	\$	3,000.00
····		Des Moines, Iowa 50321			
	ID# 376	Iowa Democratic Party			
10/25/2008	CK# 5012	5661 Fleur Drive	State Party	\$	1,000.00
		Des Moines, Iowa 50321	1 '		
	ID# 376			 -	
	CK#		7		
					
	ID# 376				
	CK#		-		
			-		
***************************************	ID# 376				
	CK#				
	CIL,				
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	CK#				
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	CK#		-		
	CK#		_		
	ID# 376				
	CK#				
	CK#		_		
	ID# 376				
	CK#				
	ICA#		-		
	L	SUB-TOTA	L	\$	9,000.00
		TOTAL (if last page of this schedule		\$	9,000.00

THIS BOX APPLIES TO CANDIDATES' COMMITEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Sch H. (Refer to Sch. H instructions.)

Expenditures to persons/entities providing consulting, advertising, fundraising, polling, managing, organizing services, must also be detail itemised on Schedule G by the amount, purpose, and date of each type A66of expenditure made by the person/entity on behalf of the candiate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

COMMITTEE NAM	E (Must I	be same as on Statement of Organization)	
Çohoon	for	Representative	

SCHEDULE	
E	IN KIND
(Rev. 02/96)	CONTRIBUTIONS
	CTHIS BOX IF DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE
10/16/08	The Muscatine County Democratic Central Committee P.O. Box 584 Muscatine, Iowa 52761		Tickets for River Rat	\$ 82.17
	Huscacine, 10wa 5276		Fundraiser	
			SUB-TOTAL	\$ 82.17
		TO	OTAL (if last page of this schedule)	\$ 82.17

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)